

## **DISCLOSURE AND AUTHORIZATION FORM**

College Success Foundation (the "Foundation") will procure a criminal background check on you in connection with your volunteer application. This background check will entail our search of the National Sex Offenders Registry and criminal history conviction records as well as searches under Washington Child/Adult Abuse Information Act and Criminal Records Privacy Act, RCW 10.97. Background checks may be done through a third party agency, and as a requirement of the Federal Trade Commission (FTC) we are furnishing you with a summary of your rights under the Fair Credit Reporting Act in a form prescribed by the FTC.

The types of information that may be obtained include, but are not limited to: criminal records checks and public court records checks. The information contained in the report will be obtained from public record sources, including county courts, state courts, the state Administrative Office of the Courts and the state Department of Corrections.

The nature and scope of any criminal background reports that may be requested is explained above. You are nonetheless entitled to request more information about the nature and scope of such reports by submitting a written request to **Diana Power, Chief Human Resources Officer College Success Foundation, 1605 NW Sammamish Road, Suite 200, Issaquah, WA 98027.** 

Your signature only authorizes the Foundation to run the criminal background check as outlined above.

## COLLEGE SUCCESS FOUNDATION MENTOR/VOLUNTEER APPLICANT DISCLOSURE STATEMENT and AUTHORIZATION

(See RCW 28A.400.303-340, RCW 43.43.830-834; Fair Credit Reporting Act, 15 U.S.C. 1681—1681u)

**INSTRUCTIONS:** Please answer all questions on this form. All required documentation requested below must accompany this statement. Your application will not be accepted without this completed and signed form. Completion of this form is required for all volunteer applicants.

Any falsification or any misrepresentation or omission of facts shall be sufficient cause for disqualification of your application. Furthermore, it is understood that this form and records become the property of College Success Foundation, which reserves the right to accept or reject it.

Name:		
Last	First	Middle
	ions, the term "convicted" includes all ins leferred or suspended sentence occurred	
☐ Yes ☐ No, I have	d of any crime against children or other pe not been convicted of any crime(s) listed of the following for which you have been	ed below.
Aggravated Murder	Child Buying or Selling	Prostitution
First, Second, or Third Degree Assault	First or Second Degree Custodial Sexual Misconduct	First Degree Arson
First, Second or Third Degree Rape of a Child	First or Second Degree Murder	First, Second, or Third Degree Rape
First Degree Burglary	First, Second, or Third Degree Assault of a Child	First or Second Degree Kidnapping
Indecent Liberties	First or Second Degree Robbery	First or Second Degree Extortion
First Degree Promoting Prostitution	First or Second Degree Manslaughter Incest	Vehicular Homicide
Fourth Degree Assault or Simple Assault	Communication with a Minor	Unlawful Imprisonment  Criminal Mistreatment
Child Abuse or Neglect as Defined in RCW 26.44.020	First or Second Degree Sexual Exploitation of Minors	Malicious Harassment
First, Second, or Third Degree	First or Second Degree Custodial Interference	Criminal Abandonment
Child Molestation	First or Second Degree Sexual	Promoting Pornography
Patronizing a Juvenile Prostitute	Misconduct with a Minor	Violation of Child Abuse Restraining Order
Selling or Distributing Erotic Material to a Minor	Child Abandonment  Custodial Assault	Felony Indecent Exposure

b.	Present Address	City/Si	ate/Zip	
c.	In the last seven years, have you lived ○ ☐ Yes ☐ No	outside of the state of V	/ashington?	
d.	If yes, please provide out of state addre You may use additional paper if necessary		s, starting with the mo	ost current.
Previo	ous Address	City/State/Zip		
Numb	ous Address oer of years/months	County		
Previo	ous Address	City/State/7in		
Previous AddressNumber of years/months		County		
Previo	ous Address	City/State/Zip		
Numb	per of years/months	County		<del></del>
	e carefully read and understand this disclose of criminal background information to the		form. By my signature	e below, I consent to the
the for College any or I und others the purification I under the purification I under the check	ant to RCW 9A.72.085, I further certify un pregoing is true and correct. In consideration ge Success Foundation and all providers of the above information.  Iderstand that, to the extent allowed by wise disclosed to the Foundation by me burpose of obtaining criminal background characteristics.	on of College Success For information from any law, information contefore, during or after macks.  y mentor/volunteer app for volunteer service re-	oundation's review of liability as a result of liability as a review, if liability as a result of liability as a result o	this application, I release furnishing and receiving volunteer application or any, may be utilized for st a criminal background and after my volunteer
	e. I understand that my consent will appl			
	onsent by sending a signed letter to Di dation, 1605 NW Sammamish Road, 9			ncer, conege success
perfor compl	understand and agree that I may be off rms a criminal background record check. I letion of the above act and, until such tim- sional basis.	understand that any of	fer of a volunteer posit	tion is conditioned on the
Dated	I this day of	, 20at		_, WA.
Mento	or/Volunteer Name (please print)	M:JJI.	Last	
	ture		Last	
Signa	ture			
Date (	of birth//////	VVVV		
	ן טט / ויווייו	1111		
Your a	application for volunteer will not be comple	ete if this form is not co	mpleted and signed. P	lease make sure you

**Return form to:** 

have answered all the questions and have signed/dated the form.

☐ Yes, I wish to receive a copy of my criminal background check.

Human Resources 1605 NW Sammamish Road, Suite 200 Isaaquah, WA 98027 Fax: 425-416-2001

HTM Form 04 Updated 5/2011

## SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you — such as if you pay your bills on time or have filed bankruptcy — to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. §§ 1681-1681u, at the Federal Trade Commission's web site (http://www.ftc.gov). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- □ You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you such as denying an application for credit, insurance, or employment must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- □ You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- □ You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs to which it has provided the data of any error.) The CRA must give you a written report of the investigation and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- □ You can dispute inaccurate items with the source of the information. If you tell anyone such as a creditor who reports to a CRA that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

- Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- □ Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- □ You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING:	PLEASE CONTACT:
CRAs, creditors and others not listed below	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580 * 202-326-3761
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 * 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 * 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552 * 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 * 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 * 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 * 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 * 202-720-7051